

AL  
12/15  
2-8  
12-1500

| POSITION                  | INITIALS | ID NO.    | DATE              |
|---------------------------|----------|-----------|-------------------|
| FEE DETERMINATION         |          |           |                   |
| O.I.P.E. CLASSIFIER       |          |           |                   |
| FORMALITY REVIEW          | AM       | 32<br>896 | 11/21<br>12/14/00 |
| RESPONSE FORMALITY REVIEW |          |           |                   |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date     |
|-------|-------|----------|----------|
| 1     | ✓     | ✓        | 12/14/00 |
| 2     | ✓     | ✓        | 12/14/00 |
| 3     | ✓     | ✓        |          |
| 4     | ✓     | ✓        |          |
| 5     | ✓     | ✓        |          |
| 6     | ✓     | ✓        |          |
| 7     | ✓     | ✓        |          |
| 8     | ✓     | ✓        |          |
| 9     | ✓     | ✓        |          |
| 10    | ✓     | ✓        |          |
| 11    | ✓     | ✓        |          |
| 12    | ✓     | ✓        |          |
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| 16    | ✓     | ✓        |          |
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| 50    | ✓     | ✓        |          |

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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| 150   |       |          |      |

If more than 150 claims or 10 actions  
 staple additional sheet here

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